

Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)					
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total
Total Claims	25	- 28 =	0	x \$18.00	\$0.00
Independent Claims	3	- 3 =	0	x \$86.00	\$0.00
Multiple Dependent Claim Fee (one or more, first added by this amendment)				\$290.00	\$0.00
Total Fees					\$0.00

PAYMENT OF FEES


5. The full fee due in connection with this communication is provided as follows:
- ☒ [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.
A duplicate copy of this authorization is enclosed.
- ☒ [x] A check in the amount of \$420.00
- ☐ [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

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(408) 938-9060

Respectfully submitted,

Date: 11/4/2003

By: 
Anthony C. Murabito
Reg. No. 35,295